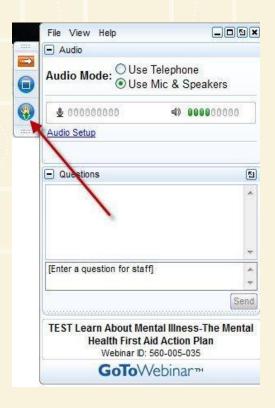
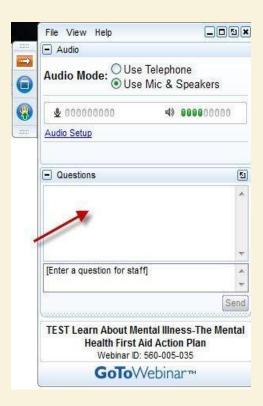
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A partnership between the Mandel School of Applied Social Sciences & Department of Psychiatry at the School of Medicine



SAMHSA-HRSA Center for Integrated Health Solutions

Enhancing Strategies to Promote Client Change in Behavioral Healthcare Settings

Presented by:

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At Case Western Reserve University
Consultant and Trainer





Learning Objectives

Brief overview of behavioral change process and core aspects of the Motivational Interviewing model.

Identify and apply strategies to engage individuals in discussions about behavior change.

Recognize and respond to language that favors making a change versus staying the same.





Webinar 1 and 2 in Review...

- Have a conversation
- Listen to the person
- Communicate understanding
- Convey hope and optimism





Webinar 1 and 2 in Review...

- Guide more than direct
- Share small amounts of information
- Respect autonomy
- Promote rapport/reduce resistance





Ten things MI is not... (Miller and Rollnick, 2009)

- The Trans-Theoretical Model (Stages of Change)
- 2. A way of tricking people into doing what you want them to do
- 3. A technique
- 4. A decisional balance (pros and cons, payoff matrix)
- 5. Assessment feedback





Ten things MI is not... (continued)

- 6. A form of Cognitive-Behavior Therapy
- 7. Client-Centered Counseling (Carl Rogers' work)
- 8. Easy
- 9. What you were already doing
- 10.A panacea (cure-all)





What is Motivational Interviewing (MI)?

"A collaborative,

person-centered

form of guiding

to elicit and strengthen

motivation for change."

(Miller and Rollnick, 2009)





Person-Centered Skills: The Basics

Utilize O.A.R.S.

- Ask **O**pen-ended questions (not short-answer, yes/no, or rhetorical)
- Affirm the person/commitment positively on specific strengths, effort, intention
- Reflect feelings and "change talk"
- **S**ummarize topic areas related to changing





Establish a Focus

People often have multiple areas of concern - as does the provider

- Use a collaborative approach
- Balance person's concerns with your own





How to Establish a Focus

Use open-ended questions to gather person's concerns

Provider shares their concerns with permission

Prioritize what person wants to address during appointment

Reprioritize, if needed, when a new concern emerges as higher priority





Consider this behavior change scenario:

We are meeting with a person for the first time, one week after being discharged from a psychiatric hospitalization. The discharge report indicates she was hospitalized after expressing suicidal ideation at her primary care appointment. The toxicology at the time of admission indicated she had opiates in her system at the time of admission. She indicated previous to hospitalization that she was abstinent from substance use. She acknowledged in the hospital that she did use, however doesn't see this as a problem.





MI Inconsistent Interventions:

Professional: Look, we need to talk about your drug use. How could you come up positive for opiates when you've been telling me you haven't been using?

[Blame, Premature Focus]

Person: That's no big deal, it was a mistake. I've been feeling really depressed lately and I just needed to escape. It's not like I do it every day.

Professional: It is a big deal. We need to talk about how using opiates is going to affect your treatment.

[Expert, Argue for Change]





Consider this behavior change scenario:

Professional: There's a lot of things happening here. We could spend time talking about this recent episode of depression or the toxicology report. Where would you like to start?

Person: I'm just really missing my mom since she died last year. I'd like to talk more about that.

Professional: Discussing your mom is a high priority for you. How about we spend most of our time talking about your mom and a few minutes at the end discussing the toxicology report. Would that be okay with you?





Establishing a Focus: Example

- Establish client's desired focus for session "There's a lot of things happening here. We could spend time talking about this recent episode of depression or the toxicology report. Where would you like to start?"
- Balances client desires and practitioner needs "Discussing your mom is a high priority for you. I'm wondering if we could spend most of our time talking about your mom and a few minutes at the end discussing the toxicology report. What do you think?"





Establish a Focus (Agenda Setting)

















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Exploring Change





Explore what is most important to the person. Look for a connection to other concerns...

Person: "Shortly after my mother died I started using pain pills to feel better. She was so strong, she never had to lean on anything to cope."

Professional: "She really wouldn't like the idea of you leaning on pills cope. What do you like about using pain pills?"





Weighing the Pros & Cons of Behavior Change

	Pros	Cons
Not Changing	"What do you like about using pain pills?"	"What are the not-so-good things about using pain pills?"
Changing	"What would be the good things about not using pain pills?"	"What would be the down- side of not using pain pills?"





Language in Favor of Change

Goal: Increase self-motivation

Listen for and encourage language in favor of change

Two types

- 1. Preparatory
- 2. Commitment





Preparatory Language

Invite the client to argue for change!

Desire – want, prefer, wish, etc.

Ability – able, can, could, possible

Reasons – Why do it? What would be good?

Need – important, have to, need to, got to





Preparatory Language Examples:

"I think I could cut back on my pain pill use."

"I've got to find another way to cope with losing my mom."

"I don't ever want to go back to the hospital, but I will if I keep using."

"I'd like to quit, but I don't know if I can."





Commitment Language

- Intention, decision
- Ready, prepared, willing
- Taking steps

<u>Commitment language</u> – the bottom line: This predicts actual change!





Commitment Language Examples:

"I'm going to find a treatment center and then quit."

"I'm done using drugs."

"I'm willing to try to quit."

"I've been slowly cutting back on how much I'm using."





STRENGTHENING LANGUAGE IN FAVOR OF CHANGE





Responding to Language in Favor of Change

When you hear language about change, don't just sit there! <u>Reflect it</u> – Restate it back to the person:

- **E**laborate: Ask for examples/elaboration. (When was the last time? In what ways? What else? What other reasons?)
- Affirm: Affirm change talk without arguing for change
- Reflect: Continuing the paragraph, etc.
- <u>Summarize</u>: "Collecting flowers (change language) into a bouquet"





Responding to Language in Favor of Change

"I really don't want to stop taking the pills, but I know that I should. I've tried before and it's really hard."

Would you reflect:

- 1. You really don't want to quit.
- 2. It's pretty clear to you that you ought to quit.
- 3. You're not sure if you can quit.





Responding to Language in Favor of Change

You reflect:

- 1. You really don't want to quit.
- 2. It's pretty clear to you that you ought to quit.
- 3. You're not sure if you can quit.

Person responds:

"I just don't know how I would cope with my depression if I quit. How have other people cope with this?"





Providing Information or Advice: Ask – Inform – Ask

- What do you already know about how the use of pain pills affects depression?
- Provide any additional or missing information
- What do you make of that? Or How does this apply to you?

Listen for language in favor of change!!





Options for *Eliciting* Change Language

"Tell me more..." "What else?"

"How have you coped with difficult times in the past?"

"What would life be like without the pills?"

"What's the worst thing that could happen if you don't make this change?"

"What would be the best thing that could happen if you did change?"

"What's most important to you?" "In what way does taking the pills help you get closer to your goals?"

"There are quite a few reasons for you to stay the same. Now is not the time for you to make a change."





Importance Ruler

Readiness Ruler Importance



On a scale of 0 - 10, how important is it for you to (quit using pain pills)?

- 1. Why are you at a ____ and not a zero?
- 2. What would it take for you to be at a ____ (one number higher)?





Confidence Ruler



On a scale of 0 - 10, how confident are you that you can (quit using pain pills)?

- 1. Why are you at a ____ and not a zero?
- 2. What would it take for you to be at a _____ (one number higher)?





Signs of Readiness for Change

Decreased discussion about the problem

From: "I don't know how I could live without the pills."

To: "I think I could cut down gradually and then quit."

Increased language in favor of change

Questions about change

"What have other people done to cope with depression?"





Signs of Readiness for Change

Imagining change

"If I do quit, I'm going to need to learn how to manage my stress better."

Resolve

"I can't go on like this, something has to change."

Taking steps

"I cut down on the pills I'm taking and it hasn't been as bad as I thought it would be."





Strengthening Commitment to Change

Summarize

- Person's perception of the problem
- Any remaining ambivalence
- Objective evidence related to importance of change
- Restatement of language in favor of change
- Your assessment of the situation





Strengthening Commitment to Change

"Key" Question

- "What now?"
- "Where would you like to go from here?"
- "What are your thoughts about how you could cope with depression and not use pills?"





Strengthening Commitment

Individual is *willing* and *able* to change now on the *threshold* of readiness

Goal: Developing and negotiating a change plan





Negotiating a Change Plan

Work collaboratively with the person to:

- Set specific goals
- Consider a range of change options
- Record the plan
- Elicit commitment





Summary

Explore the person's concerns

Focus on what the person is saying

Check understanding

Let the person voice the reasons for change

Assess importance, confidence and readiness

Proceed at the person's pace





Resources

- William R. Miller & Stephen Rollnick (2002). *Motivational Interviewing: Helping People for Change*, 3rd Ed. NY: Guilford Press.
- Hal Arkowitz, Henny A. Westra, William R. Miller & Stephen Rollnick (Eds.) (2007). *Motivational Interviewing in the Treatment of Psychological Problems*. NY: Guilford Press.
- David B. Rosengren (2009). Building motivational interviewing skills: A practitioner workbook. NY: Guilford Press.
- Sylvie Naar-King & Mariann Suarez (2012). *Motivational Interviewing with Adolescents and Young Adults*. NY: Guilford Press.

MI Website: http://www.motivationalinterview.org/

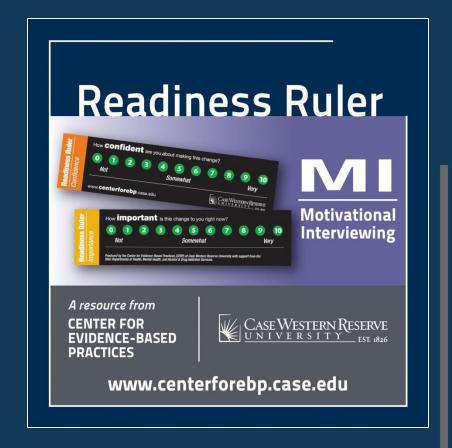




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The resources and information needed to successfully Integrate primary and behavioral health care

For information, resources and technical assistance contact the CIHS team at:

Online: integration.samhsa.gov

Phone: 202-684-7457

Email: Integration@thenationalcouncil.org









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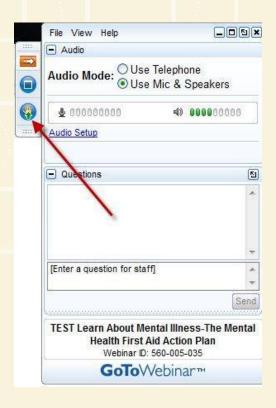
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